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24227
52427 7590 04/10/2009

MURHEAD AND SATURNELLI, LLC
200 FRIBERG PARKWAY, SUITE 1001
WESTBOROUGH, MA 01581 EMC Corporation

Office of Patent Counsel
176 South Street
Hopkinton, MA 01748

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Sandra Pires	(Depositor's name)
<i>Sandra</i>	(Signature)
July 9, 2009	(Date)

APPLICATION NO	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO
09/891,143	06/25/2001	Peter Kamvysselis	EMS-01701	8831

TITLE OF INVENTION: MULTIPLE JOBS PER DEVICE ON RA

07/14/2009 MGEBRM2 00000061 050089 09891143
01 FC:1501 1510.00 DA

APPLN TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1510	\$0	\$0	\$1510	07/10/2009

EXAMINER	ART UNIT	CLASS-SUBCLASS
TANG, KENNETH	2195	718-102000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). <input type="checkbox"/> Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. <input type="checkbox"/> "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.	Muirhead and Saturnelli, LLC 1 _____ 2 _____ 3 _____
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3 ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE
EMC Corporation

(B) RESIDENCE: (CITY and STATE OR COUNTRY)
Hopkinton, Massachusetts

Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government

4a. The following fee(s) are submitted:

Issue Fee
 Publication Fee (No small entity discount permitted)
 Advance Order - # of Copies _____

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 The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 05-0889 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.

b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature Donald W. Muirhead

Date July 9, 2009

Typed or printed name Donald W. Muirhead

Registration No. 33,978

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